

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Printed
November 2010

Please type or print in ink.

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)
Lombard		James	D

1. Office, Agency, or Court

Agency Name

State Controller's Office

Division, Board, Department, District, if applicable

Executive Office

Your Position

Chief Administrative Officer

► If filing for multiple positions, list below or on an attachment.

Agency: See attached

Position:

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of

☐ Other

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is / / through December 31, 2010.

☐ **Leaving Office:** Date Left / / (Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is / / through the date of leaving office.

☐ **Assuming Office:** Date / /

☐ **Candidate:** Election Year Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ **Schedule A-1 - Investments** - schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** - schedule attached

☐ **Schedule A-2 - Investments** - schedule attached

☐ **Schedule D - Income - Gifts** - schedule attached

☐ **Schedule B - Real Property** - schedule attached

☐ **Schedule E - Income - Gifts - Travel Payments** - schedule attached

-or-

☒ **None - No reportable interests on any schedule**

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
(Business or Agency Address Recommended - Public Document)

300 Capitol Mall, Suite 1850

Sacramento

CA

95814

DAYTIME TELEPHONE NUMBER

(916) 327-8299

E-MAIL ADDRESS

jlombard@sco.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 1, 2011
(month, day, year)

Signature

(your filing official)

James Lombard

Attachment I

Multiple Positions

Agency: Department of Finance

Position: FI\$Cal Steering Committee Member

Agency: Public Works Board

Position: Member representing Controller

Agency: Technology Services Board

Position: Member representing Controller

Agency: State Lands Commission

Position: Member representing Controller